FOPM B30 (Official Form 10) (Rev. 4/98)		
United States Bankruptcy Court UTHERN DISTR 61288, Houston TX 77208 (Houston Div	vision)	
Name of Debtors	Case Number	
 X Stage Stores, Inc., a Delaware corporation Specialty Retailers, Inc., a Texas corporation Specialty Retailers, Inc. (NV), a Nevada corporation 	00-35078-H2-11 00-35079-H2-11 00-35080-H2-11	UNITED STATES COURTS GOUTHUM DISTRICT OF TEXAS FILLD
*place an "x" beside the name of the Debtor you are filing a claim against		AUG n 7 2000
Name of Creditor (The person or other entity to whom the debtor owes money or property): Donna Foret	Check box if you are aware that anyone else a filed a proof of claim relating to your claim. Attach copy of statement	Annual is mithy, Gerk of Court
	giving particulars.	<u> </u>
Name and address where notices should be sent: ***********************************	Check box if you have never received any notices from the bankruptcy court in this case	
103 Foret St Raceland LA 70394-3408	Check box if the address differs from the address on the envelope sent to you by the	
	court.	
Account or other number by which creditor identifies debtor: Non-applicable	Check herereplaces if this claim, amends a previously filed claim, dated:	
1. Basis for Claim Goods sold Services performed	Retiree benefits as defined in 11 U.S.C. § 1114(a) Wages, salaries, and compensation (Fill out below) Your SS#: 438 _ 11 _ 3776	
Money loaned Personal injury/wrongful death Taxes	Unpaid compensation for services performed from to	
X other <u>sexual ha</u> rrassment	(date)	(date)
2. Date debt was incurred:	3. If court judgment, date of	otained:
4. Total Amount of Claim at Time Case Filed: \$ <u>unliquida</u> If all or part of your claim is secured or entitled to priority, also comple Check this box if claim includes interest or other charges in additional charges. additional charges.	ete Item 5 or 6 below.	Attach itemized statement of all interest or
5. Secured Claim Check this box if your claim is secured by collateral (including a right of setoff).	6. Unsecured Priority Claim. Check this box if you have an unsecured priority claim Amount entitled to priority \$	
Brief Description of Collateral: Real Estate Motor Vehicle Other All personal and intangible property of Debtor's Estate	Specify the priority of the claim: Wages, salaries, or commissions (up to \$4,300),* eamed within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3)	
Value of Collateral: \$	 Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4). Up to \$1,950° of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6). Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. 507(a)(7). 	
Amount of arrearage and other charges <u>at time case filed</u> included in secured claim, if any \$	Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8). Cher - Specify applicable paragraph of 11 U.S.C. § 507(a). *Amounts are subject to adjustment on 4/1/98 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.* IIGht to Sue let are a transfer.	
 7. Credits: The amount of all payments on this claim has been credited and of the purpose of making this proof of claim. 8. Supporting Documents: Attach copies of supporting documents, surnotes, purchase orders, invoices, itemized statements of running accounts, concourt judgments, mortgages, security agreements, and evidence of perfection DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary. 9. Date-Stamped Copy: To receive an acknowledgment of the filing of yearclose a stamped, self-addressed envelope and copy of this proof of claim. 	ch as promissory ntracts, of lien.	This Space is for Court Use Only
Sign and print the name and title, if any, of the creditor or or extended to the copy of power of attorney. If any):	ther person authorized to file this claim	
Penalty for presenting freudulent cleim: Fine of up to \$500,0	000 of imprisonment for up to 5 years, or both	18 U.S.C. 88 152 and 3571

ClibPDF - www.fastio.com

ADDENDUM

I worked for Specialty Retailers, Inc., at The Stage Store, in Thibodaux, Louisiana, at the Plaza del Rienzi Shopping Center. The harassment was done by Gary Ford. The hostile work environment was created by him and made worse by the failure of management to properly address the problem. The relevant period is June 11, 1997 through October 4, 1997, and then, up through November 8, 1997. On numerous occasions, Mr. Ford addressed me in various ways, as: "Hun", "Babe", "Love", or "Chere". I told him I objected to these terms of endearment. He said, "O.K.", but continued to use them. When speaking to me he got excessively close to me, in a manner which found objectionable. He would allow his hand to slide down my arm, or down my back. I told him, "I don't like you touching me." He ignored my complaint. He once put his hand on one of my thighs. I complained to management, through Asst. Mngr., Priscilla Bonvillain, and District Manager, Bill Calis (or Callais) and, possibly, Jane Pyle. I called the "hot line" several times. There was no corporate procedure which allowed a form to be filled out; nothing given to me in writing; no statement that the matter was being investigated; no statement that Mr. Ford was reprimanded. I was not told that my complaint was being treated seriously. Mr. Ford was transferred without explanation. However, his replacement (Randy) acted as if he was aware of my complaint and treated me in a cold and somewhat hostile manner, as if I was going to pay a price for having complained about the sexual harassment. Gary Ford talked to all of the employees about me. He would tell them I would never move up with Stage as long as he worked there, because my boyfriend was a musician and I spent my evenings in the bars. Most of the employees told this to me after he spoke to them. The conduct to which I was subjected was unacceptable and the matter was not resolved in a proper way. I felt coerced into quitting because of the hostile work environment, the failure to resolve the matter, and the manner in which I was treated because I brought up the complaint. I suffered mental anguish and emotional upset. I did complain to my doctor about the harassment, Dr. Mike Marcello. I believe I am entitled to \$15,000.00 in compensatory damages for income loss, \$25,000.00 for emotional upset and mental anguish, and \$30,000.00 in punitive damages, plus attorney fees.

DONNA FORET

ClibPDF - www.fastio.com

رمحوه

EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

NOTICE OF RIGHT TO SUE -- TITLE VII / ADA

(Conciliation Failure)

To:

Donna M. Foret

103 Foret Street

Recetand, LA 70394

On behalf of a person aggrieved whose identity is (29 C.F.R. 1601.7(a))

From:

U.S. Equal Employment Opportunity Commission

New Orleans District Office

701 Loyola Avenue, Suite 600

New Orleans, Louisiana 70113

Charge Number

EEQC Representative

Telephone Number

270-98-1984

Michelle T. Butler, Supv. Trial Attorney

(504) 589-6817

(See the additional information attached to this form)

The Commission has found reasonable cause to believe that your charge of employment discrimination is true but has not entered into a conciliation agreement to which you are a party because attempts to achieve such a voluntary settlement with respondent(s) have been unsuccessful.

The Commission has determined that it will not bring a civil action against the respondent(s) and accordingly is issuing this Notice of Right to Sue. With the issuance of this Notice the Commission terminates its process with respect to your charge, except that the Commission may seek status as intervenor if you decide to sue on your own behalf as described below.

If you want to pursue your charge further, you have the right to sue the respondent(s) named in your charge in United States District Court. IF YOU DECIDE TO SUE, YOU MUST DO SO WITHIN NINETY (90) DAYS FROM YOUR RECEIPT OF THIS NOTICE OF RIGHT TO SUE: OTHERWISE YOUR RIGHT TO SUE IS LOST.

Your suit may include any allegation contained in your charge of employment discrimination or any matter which was or should have been discovered by the Commission during its investigation of your charge.

I certify that this notice was mailed on the date set out below.

On Behalf of the Commission

(Date Mailed)

PATRICIA I. BIVINS, Distri€t Defector

Enclosures

ClibPDF - www.fastio.com

Information sheet Copy of Charge

cc:

Specialty Retailers, Inc. Respondent(s) Stage Stores, Plaza Del Rienzi Shopping Center 357-A North Canal Blvd. Thibodaux, LA 70301

Robert K. McCalla, Respondent's Attorney

EEOC Form 161-A (Test 10/94)